



Transferred Residential Utility Accounts

Please complete the following application and sign after reading:

New Service Address _____ Ave Blvd Cir Ct Ln St Dr

Previous Service Address _____ Name on Previous Account _____

Name For New Account Last _____ First _____

Mailing address if different than service address _____

Social Security Number _____ Drivers License # _____ DL State _____

Home Phone Number _____ Cell Phone Number _____

Place of Employment _____ Employer Phone Number _____

Additional Person Authorized to Account _____
(Authorized to access or change account information and initiate changes to utility service.)

Sewer charges are based on the established sewer average from a previous location, an assumed sewer average of 9,100 gallons usage per month, or actual monthly usage, until a new sewer average is established based on water consumption as shown on January, February and March utility bills.

CAUTION

The summer months are historically high water usage periods. A selection of actual monthly usage during and prior to this time could increase the monthly sewer charges. Many customers increase their water consumption due to outside activities, swimming pool usage, sprinklers, etc. A signed authorization for the actual water usage option must be on file with the city in order to initiate the actual usage option.

Select one: 9,100 Gallons _____ Actual Usage _____ Previous Established Rate _____

Service Start Date _____ Circle one: AM PM Is water on? Yes ___ No ___

All new accounts will be next day service and will occur between 7:00 AM and 4:00 PM. If the water meter is turned off the customer or an adult member of the customer's family must be present before a City of Broken Arrow employee will turn on the water to a residence. An AM appointment is 7:00 AM to 12:00 AM and a PM appointment is 12:00 noon to 4:00 PM. A person of legal age must sign a release form confirming that water service is not leaking in the house before the City employee will leave the water service turned on.

I attest by my signature below that the above personal information contained in this application submitted to the City of Broken Arrow is true and correct and my signature confirms my identity as the person stated on this application.

Signature _____ Date _____
(Must be signed by primary account holder)

FOR CITY USE ONLY:

Entered New Account _____ Date _____